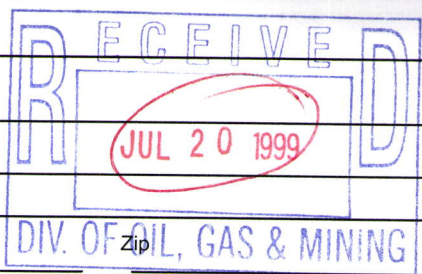


*This portion MUST be returned with your payment to ensure proper credit. THANK YOU*

ACCOUNT BILLED	PROJECT NAME	PROJECT ID
LEXCO INC	ITM MINE	S470035

DUE DATE	ANNUAL FEE	PAST DUE	AMOUNT DUE	<input type="checkbox"/> FEE NOT ENCLOSED
7/30/1999	\$ 100	\$ 0	\$ 100	Permittee requests an inspection to close out this permit.
TAX ID OR SOCIAL SECURITY #				

DIVISION OF OIL GAS AND MINING  
1594 WEST NORTH TEMPLE SUITE 1210  
PO BOX 145801  
SALT LAKE CITY UT 84114-5801

Change of Address	
Contact	
Address	
State	
Phone	

*Please make check payable to:*  
**Division of Oil, Gas and Mining**